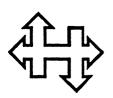
MORTON NELSON, M.D., M.P.H. HEALTH COMMISSIONER



"HEALTH IN MANY WAYS"

DAVID B. PEDEN, M.P.H.
DIRECTOR
DIVISION OF ENVIRONMENTAL HEALTH

Combined Health District Montgomery County

> COUNTY GOVERNMENT PLAZA 451 WEST THIRD STREET DAYTON, OHIO 45422

DOARD OF HEALTH

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DAVID ULRICH, D.D.S.
JOHN WORTHMAN, M.D.

November 5, 1984

Alcine Grillot 2708 Kreitzer Road Dayton, Ohio 45439

Re: South Dayton Landfill 1975 Springboro Pike Moraine, Ohio 45409

Dear Sir:

On December 31, 1984, your state license to operate a solid waste disposal facility expires. If you desire to operate a solid waste disposal facility in 1985, the enclosed application should be completed and returned to this office together with the license fee of Thirteen Hundred Dollars (\$1300) by December 17, 1984.

Please complete and return this application and fee made payable to:

Combined Health District of Montgomery County
451 West Third Street
P. O. Box 972
Dayton, Ohio 45422

If you have any questions or if we can be of assistance, please call 225-4446.

Sincerely,

Terry L. Wright, M.P.H.

Supervisbr

Bureau of General Services

TLW/njr

Enclosure



OHIO ENVIRONMENTAL PROTECTION AGENCY DIV JON OF SOLID & HAZARDOUS WASTE NAGEMENT

APPLICATION FOR LICENSE TO OPERATE A SOLID WASTE DISPOSAL FACILITY

Montgomery County	DISTRICT	F BOARD OF	HEALTH		
Name of Applicant <u>Alcine Grillo</u>	·t				
Address of Applicant <u>2708 Kreitzer</u>	Road, Day	ton, Ohio	45439		
Name of FacilitySouth Dayton	Landfill				
Location of Facility 1975 Springbo	ro Pike, M	loraine, (Ohio 45409		
Is this application for a Governmental	01	r Private _.	opera	tion?	
Is this facility currently licensed?	Yes	No			
Have plans been approved for this faci	ility? Yes	No.	0		
If no, has an operational report been	submitted?	Yes	No	-	
Hours of Operation: Mon.	Tues.	Wed.	Thurs.	Fri.	Sat.
(Indicate opening time and closing time)	***************************************		***************************************	**************************************	Angel Company of the
<u>Disposal Method</u> :					
Landfill Incinerator C	Composting _	Oth	er		
The applicant signing this application satisfactory compliance with Ohio Soli Chapters 3745-27 and 3745-37 of the Ohio Revised Code.	id Waste Law	: Chapter	3734 of the ()hio Revise	
	(Sign	ature of A	pplicant)		
HEALTH DEPARTMENT USE					
Approved(Date)	(Titl Date:	•		-	
Denied(Date)	Fee \$		Includ	le with App	lication
(Health Commissioner)					
Date license issued					
License number					